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PTO/SB/01 (12-97)  
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**DECLARATION FOR UTILITY OR  
 DESIGN  
 PATENT APPLICATION  
 (37 CFR 1.63)**

- ☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	13/068
First Named Inventor	Linas-Brunet, M. et al
<b>COMPLETE IF KNOWN</b>	
Application Number	09 / 368,866
Filing Date	08/05/99
Group Art Unit	1613.
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Hepatitis C Inhibitor Tri-Peptides

the specification of which *(Title of the invention)*  
☐ is attached hereto  
 OR

☒ was filed on (MM/DD/YYYY) 08/05/1999 as United States Application Number or PCT International Application Number 09/368,866 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 35(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			YES	NO	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto;

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/095,931	08/10/1998	
60/132,386	05/04/1999	

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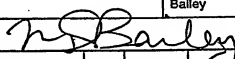
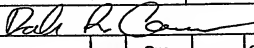
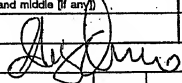
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Murray D.				Bailey			
Inventor's Signature						Date	May 25/00
Residence: City	Pierrefonds	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 344 Groulx							
Post Office Address							
City	Pierrefonds	State	Que.	ZIP	H8Y 1B3	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Dale, R.				Cameron			
Inventor's Signature						Date	May 24/00
Residence: City	Rosemere	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 493 de l'Erablere							
Post Office Address							
City	Rosemere	State	Que.	ZIP	J7A 4M4	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Elise				Ghiro			
Inventor's Signature						Date	25 May 00
Residence: City	Laval	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 768 Piere							
Post Office Address							
City	Laval	State	Que.	ZIP	H7X 3L8	Country	Canada

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b> Page <u>2</u> of <u>4</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Nathalie				Goudreau			
Inventor's Signature	<i>Nathalie Goudreau</i>					Date	May 24/00
Residence: City	Mont-Royal	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 416 Graham							
Post Office Address							
City	Mont-Royal	State	Que.	ZIP	H3P 2C9	Country	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Marc-Andre				Poupart			
Inventor's Signature	<i>Marc Poupart</i>					Date	May 24/00
Residence: City	Vimont	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 101 Alme Seguin							
Post Office Address							
City	Vimont	State	Que.	ZIP	H7M 1B3	Country	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Jean				Rancourt			
Inventor's Signature	<i>Jean Rancourt</i>					Date	May 24/00
Residence: City	Laval	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 6400 de l'Algon							
Post Office Address							
City	Laval	State	Que.	ZIP	H7M 4W2	Country	Canada

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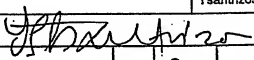
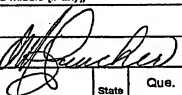
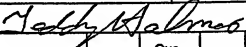
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>4</u>
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Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Youla S.				Tsantrizos			
Inventor's Signature						Date	May 24/00
Residence: City	Saint-Laurent	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 1590 Champigny							
Post Office Address							
City	Saint-Laurent	State	Que.	ZIP	H4L 4P7	Country	Canada
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Anne-Marie				Faucher			
Inventor's Signature						Date	May 24/00
Residence: City	Oka	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 11 Lefebvre North							
Post Office Address							
City	Oka	State	Que.	ZIP	JON 1E0	Country	Canada
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Teddy				Halmos			
Inventor's Signature						Date	May 24/00
Residence: City	Laval	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 1935 Jean Picard #8							
Post Office Address							
City	Laval	State	Que.	ZIP	H7T 2K4	Country	Canada

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page 4 of 4
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Dominik M.				Wernic			
Inventor's Signature	<i>Del Wernic</i>					Date	<i>May 25/00</i>
Residence: City	Laval	State	Que.	Country	Canada	Citizenship	CA
Post Office Address 900 des Giroflees							
Post Office Address							
City	Laval	State	Que.	ZIP	H7X 3G5	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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